Arizona Dept. of Health Services Division of Behavioral Health Services

Tidbits



June 2006

OPS Tidbits is a monthly publication of the Arizona Department of Health Services, Division of Behavioral Health Services, Office of Program Support Services

150 North 18th Avenue, 2nd Floor, Phoenix, AZ 85007

http://www.azdhs.gov/bhs/tidbits



Do You Have Your NPI?

On May 23, 2007 all covered entities must have a National Provider Identifier. RBHAs are encouraged to help providers obtain an NPI number. Additional information regarding

NPI can be found on the CMS website http://www.cms.hhs.gov/MedicareProviderSupEnroll/

The following BHS provider types <u>are required</u> to have an NPI number by 5/23/2007:

- 02 Level I Hospital
- 03 Pharmacy
- 04 Laboratory
- 06 Emergency Transportation
- 08 MD-Physician
- 11 Psychologist
- 12 CRNA-Certified Registered Nurse Anesthetist
- 18 Physicians Assistant
- 19 Registered Nurse Practitioner
- 31 DO-Physician Osteopath
- 71 Level I Psychiatric Hospital
- 77 Outpatient Clinic
- 78 Level I Residential Treatment Center Secure (non IMD)
- 85 Licensed Clinical Social Worker
- 86 Licensed Marriage/Family Therapist
- 87 Licensed Professional Counselor
- A2 Level III Behavioral Health Residential (non-IMD)
- A3 Community Service Agency
- A4 Licensed Independent Substance Abuse Counselor (LISAC)
- A5 Therapeutic Foster Care Home
- A6 Rural Substance Abuse Transitional Center
- B1 Level I Residential Treatment Center-Secure (IMD)
- B2 Level I Residential Treatment Center Non-Secure (non-IMD)
- B3 Level I Residential Treatment Center Non-Secure (IMD)
- B5 Level I Subacute Facility (non-IMD)
- B6 Level I Subacute Facility (IMD)
- B7 Level I Crisis Services

The BHS provider types listed below <u>are not required</u> to have an NPI number:

- 28 Non-emergency Transportation
- 39 Habilitation Provider
- 72 TRBHA/RBHA
- 73 Out of State 1 Time Provider
- 74 Level II Behavioral Health Residence (non
- 97 Air Transportation

Where's That Code?

The B2 Matrix will no longer display procedure codes with an end date older than 2 years from each revision date. This change will be effective with the July 2006 update of the Covered Services Guide.

TPL Referral/Change Form

A medical insurance referral form should be completed and submitted to AHCCCS/PCG whenever medical insurance information other than AHCCCS is obtained from an AHCCCS recipient, or whenever previously reported medical insurance information has terminated or changed. To access the form, please visit https://cmts.pcgus.com/tplreferrals/.



New Staff!!!

Please join the Office of Program Support in welcoming Dianna Gates as the newest addition to our team.

Dianna, who has been assigned as the RBHA Representative to ValueOptions, has been with the Department of Health Services for over 2 years as an analyst in the IT Department.

!! Edit Alerts !!

An Edit alert is a faxed and e-mailed notice of system enhancements or changes. The Office of Program Support strives to ensure any system enhancements or changes are communicated to all program participants in an accurate and reliable manner. Edit alerts will be distributed when the information is first made available and again with

the following monthly publication of the Tidbits.

New/Changed Edit Alert

Tracking Number: 47

Implemented:

Reference Title Medicare Part B Encounter Edit Process (Revised)

Notification Date: April 28, 2006

Expected Implementation Date: June 21, 2006 ADHS will provide the RBHA's with 90 days notice when possible

Change Description: Any procedure code identified on the AHCCCS PMMIS system as not covered by Medicare does not require the provider to submit a Medicare paid amount or zero fill the Medicare fields. However, if the RBHA does submit a Medicare loop the Medicare fields must be populated with a zero or greater amount.

> RBHAs can verify if a service is covered by Medicare by viewing the monthly reference file Refer02.zip. In the M2 Procedure Segment (Data Name) the RBHA can confirm Medicare coverage by checking Position 74 (Medicare Coverage Indicator). If the field is populated with a "Y" the code is covered by Medicare. If the field is left blank the code is not covered by Medicare

Description:

Any procedure code identified on the AHCCCS PMMIS system as not covered by Medicare does not require the provider to submit a Medicare paid amount or zero fill the Medicare fields. However, if the RBHA does submit a Medicare loop, the Medicare fields must be populated with a zero or greater amount.

RBHAs can verify if Medicare covers a service by viewing the monthly reference file Refer02.zip. In the M2 Procedure Segment (Data Name) the RBHA can confirm Medicare coverage by checking Position 74 (Medicare Coverage Indicator). If the field is populated with a "Y", Medicare covers the code. If the field is left blank. Medicare does not cover the code.

Encounter Financial Fields

Due to AHCCCS system modifications effective September 2006, encounter financial fields (such as billed charges, health plan allowed amount, health plan paid amount, coinsurance, deductible and copay) will no longer be available for error correction using the online pend correction process.

Claims and Encounters Submissions

In an effort to clarify confusion, the ADHS/DBHS Policy Office is in the process of revising Section 6.1 of the Provider Manual (Submitting Claims and Encounters). The revision will address issues related to RBHA encounter submissions and Tribal RBHA (TRBHA) Fee For Service (FFS) claims. Provider Manual Section 6.1 will become 6.1 and 6.2.

Section 6.1 will define TRBHA FFS claim submission requirements. Section 6.2 will define all of the requirements for submitting encounters, including time frames.

The DBHS Policy Committee will review the revisions internally in July. Recommendations/changes resulting from the Policy Committee Review will then be incorporated into these sections. The completed 6.1 and 6.2 will be sent to the T/RBHAs for public comment when all Policy Committee recommendations have been included.

Please be sure to review the policy revisions and respond in the allotted time.

A0160 (Non-Emergency Transport) and Provider Types 85, 86 and 87

Service code A0160 (Non-emergency transport; per mile-case worker or social worker) has been opened to provider types 85, 86 and 87, effective immediately.

This will allow these provider types to encounter mileage for non-emergency transport services. refer to the Core Provider Travel Limitations on pages 22 and 23 of the Covered Services Guide to ensure travel mileage is encountered correctly.

Additionally, if provider type 85, 86 or 87 travels to meet a client and the client does not keep the appointment, the provider can bill for the full mileage traveled, since the provider will be unable to bill for the "no show" appointment.

peals,

Demographic Sanctioning Changes

Sanctions that were scheduled to begin on 7/1/06 have been changed to 9/1/06.

Originally, all open intakes in CIS without a complete demographic were to become sanctionable effective 7/1/06. OPS revised the procedure so that all intakes without a complete demographic opened 1/1/06 forward will not become sanctionable until 9/1/06. This action greatly reduces the amount of demographic clean up required by the RBHAs.

RBHAs will need to address demographics that have not been completed through the normal process of required assessments at the one-year mark.

The sanctionable date for closed intakes without a disenrollment has also changed from 7/1/06 to 9/1/06. Sanctions will only apply to closed intakes without a disenrollment for FY06 (7/1/06 through 6/30/06). Again, this will greatly reduce the amount of closed intakes without a disenrollment the RBHAs will need to address. The closed intakes without disenrollments prior to FY06 will be addressed through an administrative action by DBHS.



Training

The Office of Program Support is offering training to the RBHAs for CIS preprocessor edits and AHCCCS pended encounter errors. The training is to instruct RBHA staff how to research

claims/encounters using CIS and PMMIS. If interested, the RBHAs are encouraged to contact their RBHA Representative for more information. The RBHAs should also contact their RBHA Representative with suggestions for other training they would like offered.

User Access Request Forms

The Corporate Compliance Office must authorize all requests for access to CIS, Office of Human Rights, Office of Grievance and Ap-

Issue Resolution system, and PMMIS (AHCCCS) databases. In order to obtain access to any of these databases, please fax or mail a copy of the appropriate User Access Request Form and User Affirmation Statement to Stacy Mobbs at (602) 364-4736.

For questions or additional information, please contact Stacy Mobbs by telephone at (602) 364-4708 or by email at mobbss@azdhs.gov.



Who Do I Call??

If you need assistance please contact your assigned T/RBHA Representative:

Eunice Argusta	NARBHA Gila River Navajo Nation Pascua Yaqui	(602) 364-4526 arguste@azdhs.gov
Dianna Gates	ValueOptions	(602) 364-4716 gatesd@azdhs.gov
Javier Higuera	CPSA	(602) 364-4715
	26 & 27	higuerj@azdhs.gov
Gary Szymanski	Cenpatico	(602) 364-4677
	02 & 22	szymang@azdhs.gov